

Annual Complaints Report 2023-24



City of Westminster



1. Introduction

- 1.1. Listening to, and learning from, complaints is an important part of ensuring that the voices of children and families are always heard, and that we continue to deliver high-quality services that are responsive to feedback.
- 1.2. This report provides an overview of complaints received by Children's Services between 1 April 2023 and 31 March 2024. This includes Social Care Complaints (statutory complaints) as well as wider Children's Services complaints (non-statutory complaints). As part of our overview of non-statutory complaints we also include information on the number of complaints related to the Libraries and Archives Service and Registrars, who report into the Executive Director for Children's Services.
- 1.3. This report explores the themes from the complaints received, as well as volumes, response times and outcomes. This report also covers positive feedback and compliments received. We produce this report annually as a statutory requirement for Westminster City Council (WCC).
- 1.4. Learning from complaints is critical and this year the key learning includes the importance of ensuring that our services are consistently high-quality, and that communication and information sharing is timely and accurate. The volume of complaints across all teams declined this year, with the exception of complaints related to our Special Educational Needs (SEN) service.
- 1.5. We have faced challenges in our SEN service related to increasing demand and a need to review our resources to ensure we can meet that demand. This is driven by a growing number of Education, Health and Care Plans (EHCPs) and a linked increase in Annual Reviews. We feel positive about improvement in this area and have agreed a business case to bolster resource within the SEN service, with recruitment in progress. We expect this activity to have a positive impact on future complaints and will update on this in next year's report.
- 1.6. Our Social Care teams received complaints related to sharing information in a timely manner and ensuring that families are kept informed as our work progresses. We continue to reinforce the importance of responsive communication through our supervision structures. The learning from complaints, as well as our response times and volumes, are now shared with our Senior Leadership Team on a monthly basis, to ensure that learning is discussed and embedded throughout Children's Services.
- 1.7. We continue to apply a systemic practice lens to how we respond to complaints. We offer a meeting to every complainant at the point a complaint is received. This allows us to better understand their concerns and respond in a more meaningful way, with the aim to resolve the complaint at the earliest possible opportunity.



2. Overview of complaints received

2.1. The Customer Relationship Team (the Team) welcomes all feedback including complaints, compliments, and comments about the services provided.

2.2. Individuals, families and carers can provide their views in an open and transparent way, through our complaints, compliments and feedback procedure.

2.3. In 2023-24, The team received 67 complaints and 50 compliments. This includes:

- 48 complaints for Children and Family Services
 - 4 of which were statutory complaints
 - 44 of which were non-statutory
- 10 complaints for Libraries and Archives
- 9 complaints for Registrars

2.4. The remainder of this report focuses on the 48 complaints received for Children and Family Services, as well as the 50 compliments received.

2.5. Some key headlines on our performance can be found below:

- Whilst 48 complaints were received, the team formally responded to 47 complaints as one complaint was withdrawn after the complainant felt satisfied that their inquiry was resolved. This is a decrease in the number of complaints responded to in previous reporting years, with 63 complaints responded to in 2022-23.
- As well as the overall volume of complaints decreasing, the number of statutory complaints also decreased, from 6 received last year, to 4 received this year.
- 83% (39) of the complaints resolved were addressed at Stage 1 and did not progress. This is a slight increase from last year, where 80% were resolved at Stage 1.
- The Social Care Teams received the majority, 60% (28), of complaints.
- 43% (20) of complaints received were about services that were 'not to the quality of standard expected'.
- 9% (4) of complaints were escalated to the Ombudsman with only 1 formally investigated.
- Of the compliments received, the Early Help team received the majority, 20% (10) of compliments.
 - The compliments addressed several topics: the high-quality service provided by staff, knowledge, expertise and professionalism in carrying out duties and the care and compassion experienced by families.



2.6. The table below shows the volume received over time, which shows a decrease in the number of complaints received. Our last Annual Report (2022-23) outlined a number of service improvement activities, following our analysis of complaints received. These included: offering Systemic Practice training to wider teams and ensuring that we share information between different directorates consistently and accurately, to ensure families receive everything they are entitled to and that we meet their needs holistically. This particularly related to Housing. We believe that our focus on continuous improvement, as linked to these themes and more widely, accounts for the decrease in complaints this year. For example, we now have a joint working protocol between Children’s Services and Housing, to strengthen collaboration.

Reporting year	Statuary complaints	Non-statutory complaints	Total no. of complaints responded to
2023/24	4	43	47
2022/23	6	57	63
2021/22	10	53	63
2020/21	5	53	58

Table 1: number of complaints received per reporting year, broken down into statutory and non-statutory

2.7. The team with the highest volume of complaints was the Social Care Teams with 60% (28) complaints. With the exception of SEN, who received the same volume as the previous year, all teams saw a decline in the number of complaints received, when compared to 2022-23.

Teams	No. of complaints responded to
Social Care Teams	28
Special Educational Needs (SEN)	13
Education – school admissions	4
Short Breaks	1
Home to school transport	1

Table 2: volume of complaints received by teams within the Children’s Services

2.8. The table below shows the breakdown of complaints received from Stages 1 through to Stage 3 and the outcome at each stage.

Stage	No. of complaints	Statutory	Non-Statutory	Upheld	Not upheld	Partially upheld
1	47	4	43	11	27	9
2	8	2	6	1	4	3
3	2	2	0	0	2	0

Table 3: number and outcomes of complaints received from Stage 1 to Stage 3



3. Complaint themes

3.1. The most common theme identified this reporting year was about the service provided not being to the standard or quality expected. This accounts for 43% (20) of the complaints accepted at Stage 1. Some of these complaints addressed issues such as parents not receiving copies of assessments, in instances where these should have been shared. This theme has been discussed with Heads of Services and teams, and the need to share information accurately and in a timely manner, is addressed through regular supervision conversations.

3.2. The other common theme identified was the failure to deliver a service, mostly in relation to the annual review of EHCP for children with special needs by the SEN Team. As our number of EHCPs has grown, so has the demand for Annual Reviews. We’ve recognised the need to increase our capacity in SEN and a business case for additional resource has been approved, with recruitment underway. We hope that this work will be reflected in a decrease in complaints related to delays from the SEN Team in our next report.

3.3. Complainants may raise multiple concerns in one complaint. Where this has happened only the primary concern reason is captured on the case management system.

3.4. These themes serve to give a better understanding of how families experience our services, what lessons that can be learnt from complaints and what training, or support we can provide to staff, to avoid complaints happening.

3.5. The table below shows the top 4 themes within complaints received:

Theme	No. of complaints
Service not to the standard or quality expected	20
Failure to deliver a service	7
Failure to do something	5
Delay in communicating an outcome	4

Table 4: top 4 themes within complaints received and volume per theme

4. Response times

4.1. Children’s Services responded to 68% (32) of Stage 1 complaints within the timescale of 10-working days. Whilst this represents an improvement from last year’s annual report, we recognise that this falls short of our target of 90% responded to within 10-working days.

4.2. We have introduced monthly complaints reporting to our senior leadership team to drive improved performance and there has been a marked improvement in response times, with 100% of complaints responded to in Q1 of 2024-25 receiving the response on time. The full year effect will be evident in next year’s annual report.



- 4.3. Some complex complaints required an extension of time to 20 working days, and 100% of these extended cases were completed within the 20 working days. This is also an increase in performance, compared to last year.
- 4.4. In cases where an extension was required or where delays were likely to occur, the Team kept complainants updated on the progress of the case and met the revised deadline.
- 4.5. The Team continues to proactively work together with Heads of Service to improve on the timeliness of complaint responses at all stages of the process.

5. Complaint outcomes

- 5.1. A complaint is upheld where it has been identified that things did not happen as they should have and there was some detriment to the service user. An example of an upheld complaint would be where there was delay in finalising an Education & Health Care plan (EHCP) according to statutory timescales.
- 5.2. A partially upheld complaint is where the service is responsible for part of the complaint but not all the issues raised, or where some of the points raised in the complaint are upheld but others are not.
- 5.3. In cases where the outcome is either upheld or partially upheld, learnings from the complaint and measures taken to improve on the service provided are recorded on the case management system. This ensures that the service does fulfil what has been promised to the service user in the complaint response.
- 5.4. Of the 47 total complaints responded to, 11 (23%) complaints were upheld while only 9 complaints were partially upheld.
- 5.5. This is a decrease of upheld complaints, with 27% upheld last year, but an increase in the proportion of partially upheld complaints, moving from 14% to 19% being partially upheld this year.

Complaints at stage 2

- 5.6. For both statutory and non-statutory complaints, 17% (8) were escalated to stage 2 of the complaints process. This is a decrease from last year, where 19% (12) were escalated to stage 2.
- 5.7. Of the 8 stage 2 complaints, only 2 were investigated under the statutory process in this reporting year. A summary of these complaints along with the recommendations made and actions taken can be found in the table in Appendix A.



Complaints at stage 3

5.8. Two stage 3 statutory complaint review requests were received this reporting year, the same number of stage 3 review requests received in the last 2 years.

5.9. One stage 3 review concluded with a 'Not upheld' outcome whilst the other review concluded with the recommendation to have the stage 2 re-investigated as some complaint points were missed and not thoroughly investigated. The summary of the 2 Stage 3 complaints investigated is included in Appendix B.

6. Ombudsman cases

6.1. A complainant has the right to refer their complaint to the Local Government and Social Care Ombudsman (LGSCO). Generally, the LGSCO first seeks to ensure that the Council has been given the opportunity to respond to the complainant at all stages of the Council's complaints procedures.

6.2. In this reporting year, 4 complaints (8.5% of the total responded to) were escalated to the LGSCO compared to 9 cases (14% of total responded to) in 2022-23.

6.3. Of the 4 complaints received, 3 were not investigated as the Ombudsman deemed 2 of them to be out of time whilst the third complaint had not completed the council's statutory complaints process.

6.4. The one case investigated was a Special Educational Needs case which was upheld, and the council found to be at fault. The LGSCO found the council to be at fault, as it delayed reviewing an EHCP that resulted in late issuing of the Plan and delays in finalising a personal budget.

6.5. The council was instructed to pay £250 to remedy the distress, time, and trouble caused to the complainant by the identified fault. To pay £1,000 to remedy the injustice caused to the child by missed educational provision from April to July 2022. Both of these payments have been made.

6.6. This case served to further emphasise the challenges within our SEN service and the need to review resources to ensure we are meeting our statutory requirements and providing services that are responsive to the needs of families. We are confident that our current recruitment activity will support improvement in this space.

7. Learning from complaints

7.1. We recognise that complaints create opportunities to improve the services we provide to individuals and families. We analyse themes within complaints to identify opportunities for improvement and this feedback feeds directly into service improvement plans and project activity.



7.2. Below are some of the key learnings identified at all stages of the complaints process received this reporting year.

Complaint	What we have done	What we will see
<p>Parent was not provided with copies of the two assessments that were completed with his family.</p>	<p>Reminded all social work teams, their managers and Heads of Service of the importance of sharing assessments with families, and where it is appropriate to do so, ensure that this is done in a timely manner. Heads of Service to ensure that this practice is embedded in supervision and that this is reflected in supervision notes.</p>	<p>Parents are provided with copies of assessments and information that they request, in a timely manner and aligned with GDPR legislation and our internal information sharing processes. Information sharing is discussed in supervision, and quality assured via our audit activity.</p>
<p>Parent complained about the management of her child's EHCP, specifically that the provisions were not being updated in the plan. There was an 8-week delay in providing an amended plan for the child.</p>	<p>We have reminded SEN teams of our responsibilities around EHCPs and how this relates to the responsibilities of schools. We have highlighted that we should have initiated the updates to the plan in this case, as a learning example. We created a business case to secure more resources for our SEN team, noting multiple complaints with similar themes. Recruitment to new roles is in progress. We wrote a letter of apology acknowledging the delay and as a result of the 8-week delay and the distress and inconvenience this caused, the Council offered the parent £130 in compensation. The payment has been made.</p>	<p>SEN colleagues understand the importance of ensuring that EHCPs are up-to-date and accurate. SEN understand the need to make timely updates and stay in touch with parents throughout our work with them. Recruitment to new SEN roles is underway.</p>

Table 5: Key learning from all stages of Complaints



7.3. Also included in this report are some of the learnings identified in the 2022-23 reporting year and the improvements put in place as a result. This demonstrates that we listen, reflect and make proactive changes.

Complaint	Learnings	What we have seen
<p>Delay in completing the EHCP annual review.</p>	<p>The completion of the annual review of Education, Health & Care plans (EHCP) within timescales.</p> <p>To communicate better with parents and to review current staffing levels.</p>	<p>Managers from the SEN service meet more regularly with the parent carer forum to explain the progress being taken to ensure annual reviews of EHCP are timely. We have agreed a business case to bolster resource within the SEN service, with recruitment in progress. We expect this activity to have a positive impact on future complaints and will update on this in next year's report.</p>
<p>The wrong use of the term "Child Protection" to identify the correct social care team.</p>	<p>Social workers must be consistent in the use of what each social care team is called to avoid confusing parents.</p>	<p>Social care teams are more consistent in the use of what each social care team is called – the use of terms like child protection in the team title as opposed to social work team can be confusing to service users.</p>
<p>A formally looked-after child, who chose to leave care and alleges that all support abruptly ended.</p>	<p>We need to ensure care leavers know what their rights are under the local offer for care leavers.</p>	<p>The Looked After Children's team is now routinely using a Leaving Care Letter which is sent out to looked after children letting them know their rights under the local offer for care leavers, especially in cases where they do not engage with the team.</p> <p>We have also updated our local offer for care leavers, and have it on our website, to make it more accessible.</p>

Table 6: Key outcomes from 2022/23 Complaints Report



8. Case studies

8.1. Building on our learning from complaints, the below explores two examples of a service improvements made as a direct result of complaints received, in more detail.

Case study 1: information sharing

We noticed a similar theme across 3 complaints, where part of the complaint related to access to information, with the complaint being that information was not shared in a transparent and open way. In these cases, domestic abuse allegations were a feature, which created tension for some social workers in regard to sharing information in a way that was both safe and appropriate.

What we have done:

- The QA and Safeguarding Service has developed practice guidance around sharing of assessments and other documents where there have been allegations of domestic abuse. It covers how best to balance a parent's right to information with ensuring safety of victims. This detailed guidance has been shared across teams and was developed with the support of Information Governance colleagues.
- Clinical Practitioners in the Assessment Team have also drafted guidance on working with parents who are separated, so that we can better manage expectations. This might include working in pairs, and reference to research evidence about what works for children in parental conflict situations. This was also the topic at a recent team away day for the Service
- The Director of Children's Services and the Head of Service worked with Team Managers to discuss how we respond to such complaints, with a review of internal processes for responding to stage 1 complaints.

Outcomes:

- Practitioners are clearer on when and how they can share information with parents who have separated, and where domestic abuse has been alleged.

What we have learnt: we've been reminded of the importance of ensuring our Social Workers have access to information and guidance that helps them make the right decisions regarding information sharing. Acknowledging our duties



Case study 2: IT and connectivity

An EHCP application was submitted online to the SEN team via our website, this generated an immediate acknowledgment email, however due to IT challenges, the application was not received in the team. Only after the deadline of 6 weeks had passed and the parent wrote in to request an update was the anomaly realised.

What we have done:

- In investigating this complaint, issues with email receipt functionality across the service were identified, which led to a reconfiguration of the SEN IT systems and further training for staff.
- The SEN team reviewed the automated email response generated with colleagues in IT to ensure it gave accurate information.

Outcomes:

- For the complainant, the application was processed as soon as the error came to light and the final EHCP issued within 5 weeks.
- Future email submissions should not face the same issues and those emailing the SEN service receive an accurate automated response.
- Families can submit information via the online form and it reaches the team in a timely manner.

What we have learnt: this complaint encouraged us to interrogate our IT systems to ensure they are robust and that families contacting us online receive accurate automated responses and their message reaches the right team. around keeping children and families safe and adhering to GDPR standards.

9. Compliments

9.1. Children's services also welcome compliments. This reporting year, a total of 50 compliments were sent to the Team.

9.2. A compliment is a courteous remark expressing admiration either for an entire team or in relation to a specific person, whilst feedback is the helpful information received from service users about the actions of the social work team or the behaviour of a specific individual.

9.3. These compliments serve as indicators of good practice and reflect the type of service that families find helpful and enable the service to further improve on the activities that are working well. Examples of the compliments received by the different teams within the service is listed in Appendix D.



9.4. The Early Help team received the highest number of compliments (10), highlighting the positive impact that Early Help support has had for families. The table below outlines the 5 teams who received the most compliments:

Teams	Compliments received
Early Help	10
Assessment & MASH team	8
NW social work team	7
Special Educational Needs	6
Looked After Children	4

Table 7: breakdown of teams with the most compliments received

10. Customer Relationship Team priorities for 2024-25

10.1. Last year we set ourselves goals that have helped to improve our performance. We also strengthened our relationship with the Corporate Complaints Team, to influence their vexatious complaints policy and ensured that their monitoring of our performance acknowledged the difference between statutory and non-statutory complaints.

10.2. Whilst it’s important to highlight our progress around complaints; with fewer received this year, and more responded to within the 10-day turnaround time, there are still areas for improvement. The Team’s priorities for 2024-25 are outlined below:

Working systemically and building relationships

Goal 1: we will continue to offer meetings to everyone who makes a complaint, to better understand their concerns and respond effectively. We will make sure that all staff within the Customer Relationship Team have had the Introduction to Systemic Practice training or a refresh, to ensure all of our complaint responses are aligned to the work of our practitioners, and that our meetings with complainants are as effective as possible.

How we handle complaints

Goal 2: we will strive to respond to at least 90% of complaints within 10-working days, in-line with corporate standards and acknowledging the distress it can cause when someone has to wait for a response from us.

Goal 3: we will strengthen our initial screening of complaints, to identify as quickly as possible, where a complaint isn’t for us or where we should be rejecting a complaint.

Goal 4: we identify learning from complaints and will continue to share this back with teams. We will also make sure that specific actions are reflected in Mosaic, for transparency and accountability.

Oversight of complaints

Goal 5: we will attend our Senior Leadership Team meetings on a monthly basis, to share learning from complaints and update on performance. These meetings will hold us to account in respect of our action plan.



City of Westminster

Adetoro Ojewale, Customer Relationship Manager for Bi-Borough Children's Services



Appendix A

Stage 2 complaints, recommendations and actions.

Case details	Our response
<p>A foster carer complained about the actions of the social worker assigned to a looked after child in her care. This led to a breakdown in the working relationship with the social worker.</p>	<p>Recommendation: to ensure consistent and accurate communication, the fostering service (which is hosted by LB Hammersmith and Fulham) should use the same case management system as our social workers to ensure clear access to information and a chronology of actions taken.</p> <p>Actions taken: The Fostering Service have successfully transitioned to using Mosaic, providing consistency across case management systems.</p>
<p>Parent (father) complained about the actions of the social worker in not providing the minutes of an ICPC in a timely manner. The complaint included allegations that the contents of the Court ordered Section 7 report was inaccurate.</p>	<p>Recommendation: an apology to be made to the father and also further complaints should not be accepted as the case was closed to Children’s Services prior to the complaint investigation.</p> <p>Actions taken: A letter of apology was sent to the father. Supervision conversations and line management structures provide oversight of all work around proceedings.</p>
<p>Parent (Father) complaining about the delay in providing him with the assessment report regarding his child. The delay meant he could not comment or correct inaccurate information.</p>	<p>Recommendations: In views of some failings identified in the stage 2 investigation, consideration should be given to financial redress, with appropriate reference to any Local Government Social Care Ombudsman’s guidance.</p> <p>Actions taken: An offer of £400 was made to the complainant but this was rejected and the offer not taken up.</p>

Table 8: Stage 2 complaints and actions taken



Appendix B

Stage 3 complaints, recommendations and actions taken.

Case details	Our response
<p>Parent complained that the Social Worker who, in his words was the “<i>main cause of the problem</i>” was not interviewed resulted in no findings being made and therefore meant that the Stage Two investigation was incomplete.</p>	<p>Recommendation: The panel did not recommend a reopening of the stage 2 investigation as the complainant was initially advised of the social worker’s absence, her expected date of return to work and the impact of her absence on the investigation’s findings. The complainant had agreed for the Stage Two investigation to proceed, despite having this information.</p> <p>Action taken: No further action was taken.</p>
<p>Parent complained that the stage 2 investigation was flawed and not open or transparent as some concerns were missed and not investigated.</p>	<p>Recommendation: To have the stage 2 investigation redone in its entirety.</p> <p>Action taken: A new Investigating Officer and Independent person were commissioned and the investigation is in progress. Moving forwards, we will provide more robust oversight to IO and IP findings before issuing response, to ensure all key points are addressed.</p>

Table 9: Stage 3 complaints and actions taken



APPENDIX C – relevant legislation

1. Legislation

- a. The Children's Social Care Statutory Complaints procedure states that an annual report must be produced for complaints made under the Children's Act 1989 Representation Procedures (England) Regulations 2006.
- b. The procedure requires the report to keep the Local Authority informed about the operation of its complaint and representations procedure.
- c. The report should be presented to staff, the relevant management committee and be made available to the regulator and the public.

2. Overview of the Children's Complaints Procedure

- a. A complaint accepted under the Statutory Children's complaints procedure is one that considers services provided to children and young people under Part 3 and some of parts 4 & 5 of the Children's Act 1989, as well as some adoption and special guardianship services, under the Adoption and Children's Act 2002. These could be complaints about un-unwelcome or disputed decision, delay in the provision of services or the contents of an assessment report involving looked after children for example. These types of complaints are considered under the **statutory** three stage complaints process. See Appendix B for an explanation of the different stages of the Statutory complaints process.
- b. Complaints which are outside of part 3 of the Children's Act as well as some parts of part 4 & 5 are categorised as **non-statutory complaints**. These complaints include those about Special Educational Needs (SEN), Transport and Commissioned services are considered under the Council's two stage corporate complaints procedure. See Appendix B for an explanation of the different stages of the non-statutory complaints process.
- c. Complaints received will be considered if they are made within 12 months of the incident happening. The team can use discretion to waive this time limit only in exceptional circumstances.
- d. Advocacy is provided in-house to assist children and young people when making a complaint.



Appendix D – complaints procedure for statutory complaints

The Children’s Act 1989 Representations Procedure (England) Regulations 2006, Children (Leaving Care) Act 2000, Adoption and Children Act 2002 and the Health and Social Care Acts 2003 require the Local Authority to have a procedure for resolving complaints and representations received by, on behalf of, or relating to children and young people.

To facilitate the procedure in a fair and consistent way the Local Authority follows guidance provided by the Local Government and Social Care Ombudsman (LGSCO), who also provide practical information on how processes can be improved. The Council also follows the principles outlined in the publication ‘Getting the Best from Complaints’ which was produced by the Department for Education.

The Statutory complaints procedure has three stages and has a strong emphasis on resolving complaints quickly and informally.

Stage 1 – Local Resolution

This is the most important stage of the complaint’s procedure, and we aspire to resolve as many complaints as possible at this initial point; within ten working days, but no more than 20 working days as this is the maximum extension that is permitted.

Stage 2 – Investigation

This stage is usually initiated when the complainant is dissatisfied with the findings of Stage 1, has not received a response within the timescales and or because it has been agreed that Stage 1 is not appropriate. An independent Investigating Officer (IO) is commissioned to investigate the complaint, and an Independent Person (IP) to oversee the fairness and transparency of it. Both the IO & IP are not employees of the Council. Following their reports, the Council will write an adjudication letter responding to the findings and any recommendations made. The end-to-end process should take no more than 65 working days.

Stage 3 - Independent Review Panel

Where complainants remain unhappy with the Stage 2 Investigation, the Council will consider arranging a complaints Review Panel. These are made up of three independent panel members, who will ask the IO, IP, and representatives of the Council (normally a Head of Service) questions to establish if the Stage 2 Investigation was robust and findings were reached in full consideration of all available information. The panel makes recommendations to the Director of Children’s Services who then reaches a decision on the matter and any actions to be taken.

There are various timescales relating to Stage 3 complaints which include:

- Organising the Panel within 30 working days of the complainant’s request



- The Chair should produce the panel's report within 5 working days of the Review Panel

APPENDIX E- non-statutory complaints procedure

In line with the Council's complaints procedure, the Team also accepts complaints that are not covered by the Children's Act 1989 but relate to the involvement of Family Services. For example, complaints made by the grandparent of a child who does not have parental responsibility but is unhappy with the actions taken by Family services or perhaps a complaint about the length of time taken by an allocated worker to return calls which is dissatisfaction with the service provided.

Stage 1

This is the most important stage of the complaint's procedure, and we aspire to resolve as many complaints as possible at this initial point; within ten working days. This stage is signed off by the Head of Service.

Stage 2

This stage is usually initiated when the complainant is dissatisfied with the findings of Stage 1 or has not received a response within the timescales and or because it has been agreed that Stage 1 is not appropriate. The stage 2 response is signed off by the Director and has a 20-working day deadline.

Advocacy

We observe best practice, in line with "Getting the best from complaints." The Team provides children and young people with information about advocacy services and offer them help to get an advocate. Advocacy can be provided by friends, relatives, advocacy groups or legal representatives.

Local Government and Social Care Ombudsman

If the complainant is not satisfied with the outcome of a statutory or non-statutory complaint, they have the right to escalate their complaint to the Local Government and Social Care Ombudsman (LGSCO).

Complainants can refer their complaint to the Ombudsman at any time, although they may be referred to the Local Authority if the complaint has not been considered or escalated through the Council's complaint process.